

October 1, 2012.

FOR IMMEDIATE RELEASE

Summary of September 20-21, 2012, Board Meeting

The following is a summary of September 20-21, 2012, meeting of the Iowa Board of Medicine.

Cases Reviewed: The Board reviewed 166 cases.

New Investigative Cases: The Board reviewed 66 new investigative cases.

Statement of Charges: Upon a determination by the Board that probable cause exists to take formal disciplinary action, the Board may file a Statement of Charges which contains the allegations of the Board.

The Board approved two Statements of Charges.

1. The Board filed a Statement of Charges and an Emergency Adjudicative Order alleging that a physician engaged in a pattern of sexual misconduct and/or unprofessional conduct in the practice of medicine. The Board alleged that the physician engaged in a pattern of inappropriate sexual conduct, including nonconsensual sexual contact, with at least six female patients and/or co-workers in Hampton, Iowa, between 2008 and May 2012. Under the terms of the Emergency Adjudicative Order, the physician's Iowa medical license is suspended until this matter is resolved. A hearing is scheduled on October 10-11, 2012.
2. The Board charged a physician with engaging in professional incompetency, practice harmful to the public, sexual misconduct and professional misconduct. The Board alleged that the physician failed to provide appropriate care to numerous patients who were diagnosed with Lyme disease and that he engaged in an inappropriate sexual relationship with a female patient. A hearing is scheduled on December 7, 2012.

Combined Statement of Charges and Settlement Agreements: Upon a determination by the Board that probable cause exists to take formal disciplinary action, the Board and the licensee may enter into a combined Statement of Charges and Settlement Agreement to resolve the matter. A combined Statement of Charges and Settlement Agreement contain the allegations of the Board and the sanctions.

The Board approved one Combined Statement of Charges and Settlement Agreements.

1. An Iowa-licensed physician who practices family medicine entered into a combined Statement of Charges and Settlement Agreement with the Board. The Board charged the physician with prescribing Phentermine, a Schedule IV controlled narcotic, to a family member on multiple occasions between April 2009 and February 2012, in violation of the laws and rules governing the practice of medicine in Iowa. Under the terms of the Settlement Agreement, the Board issued the physician a public reprimand and ordered her to pay a \$2,500 fine. The Board also ordered the physician to complete a Board-approved professional ethics program.

Settlement Agreements: After the Board has determined that probable cause exists to take formal disciplinary action and formal disciplinary charges have been filed, the Board and the licensee may enter into a Settlement Agreement to resolve the pending disciplinary charges rather than hold a formal disciplinary hearing.

The Board approved one Settlement Agreements.

1. An Iowa-licensed physician who practices orthopedic surgery entered into a Settlement Agreement with the Board. On March 1, 2012, the Board charged the physician with engaging in sexual misconduct, unethical or unprofessional conduct and professional incompetency. The Board alleged that the physician performed inappropriate physical examinations on four female patients between September 2008 and March 2010. Under the terms of the Settlement Agreement, the Board issued the physician a public reprimand and ordered him to pay a \$10,000 fine. The Board also ordered the physician to complete a professional boundaries program, sexual misconduct treatment and a neuropsychological evaluation. The physician is also required to have a Board-approved chaperone present when treating female patients in the future. Finally, the Board placed the physician on probation for a period of five years subject to Board monitoring.

Stipulated Orders: The Board and the licensee may enter into a Stipulated Order which is a public agreement between the Board and licensee.

The Board approved three Stipulated Orders.

1. An Iowa-licensed anesthesiologist who practiced pain management in Des Moines, Iowa, entered into a Stipulated Order. On August 23, 2012, the Board charged the physician with failing to provide appropriate pain care to numerous patients. On September 5, 2012, the physician was charged with eight counts of involuntary manslaughter for allegedly prescribing large amounts of narcotic painkillers to patients who later died of drug overdoses. Under the terms of the Stipulated Order, the physician agreed not to engage in the practice of medicine until the pending disciplinary charges have been resolved and the Board agreed to postpone the hearing before the Board until the criminal charges have been resolved.

2. An Iowa-licensed physician who practiced family medicine entered into a Stipulated Order with the Board. On August 31, 2012, the physician was charged with three counts of Distributing - Controlled Substances in the U.S. District Court for the Southern District of Iowa, in Davenport, Iowa. A Board investigation is pending. Under the terms of the Stipulated Order, the physician agreed not to engage in the practice of medicine until the Board approves his return to the practice of medicine.
3. An Iowa-licensed physician who practiced nuclear medicine entered into a Stipulated Order with the Board. On November 18, 2011, the Board issued a Confidential Evaluation Order requiring the physician to complete a comprehensive physical, neuropsychological, mental health, unprofessional conduct and/or disruptive behavior evaluation due to concerns that he engaged in a pattern of unprofessional conduct and/or disruptive behavior. The physician filed an Objection contesting the allegations in the Confidential Evaluation Order. The physician informed the Board that he has moved out of the country and does not intend to practice medicine under his Iowa medical license at this time. The physician requested that the Board stay enforcement of the Confidential Evaluation Order if he agrees not to practice medicine under his Iowa medical license. Under the terms of the Stipulated Order, the physician agreed not to engage in the practice medicine under his Iowa medical license until he completes a comprehensive physical, neuropsychological, mental health, unprofessional conduct and/or disruptive behavior evaluation at a Board-approved assessment program and the Board agreed to stay enforcement of the Confidential Evaluation Order as long as the physician fully complies with the Stipulated Order.

Confidential Evaluation Orders: If the Board receives evidence that a physician may suffer from physical, neurological, mental condition or substance abuse, the Board may issue a confidential evaluation order requiring the physician to complete an appropriate evaluation at a Board-approved program. Additionally, if the Board receives evidence that a physician lacks the appropriate knowledge or ability to practice medicine with reasonable skill or safety or that a physician has failed to provide appropriate care to patients, the Board may issue a confidential order requiring the physician to complete a competency evaluation at a Board-approved competency assessment program.

The Board voted to issue one confidential Evaluation Orders due to the following areas of concern:

1. The Board ordered a physician who practices internal medicine to complete a comprehensive sexual misconduct evaluation at a Board-approved evaluation program.

Termination Orders: After the licensee successfully completes the terms of a disciplinary order, the Board issues an order terminating the terms and conditions of the order.

The Board approved two Settlement Agreements.

1. An Iowa-licensed physician who practices radiology had the terms of his order terminated by the Board. The physician entered into a combined Statement of Charges and Settlement Agreement with the Board. The Board charged the physician with inappropriately accessing the medical records of an individual who was not under his care. The Board issued the physician a public reprimand and ordered him to pay a \$2,500 fine and complete a Board-approved professional ethics program. The physician paid the \$2,500 civil penalty and successfully completed the Board-approved professional ethics program.

2. An Iowa-licensed physician who practices family medicine had the terms of his order terminated by the Board. The physician entered into a combined Statement of Charges and Settlement Agreement with the Board. The Board charged the physician with failing to provide appropriate obstetrical care to a female patient. The Board alleged that the physician failed to go to the hospital to examine the patient in a timely manner and failed to timely diagnose and manage the patient's pre-term labor. The Board issued the physician a public reprimand and ordered him to pay a \$2,500 fine. The physician also agreed to complete a Board-approved education program for advanced obstetrical care for family practice physicians and submit a written corrective action plan which describes what he has learned from this case and the steps he has taken to avoid similar concerns in the future. The physician paid the \$2,500 civil penalty, submitted a written corrective action plan and successfully completed a Board-approved advanced obstetrical care program.

Confidential Letters of Warning or Education: When the Board determines that probable cause does not exist to take formal disciplinary action the Board may send a confidential, non-disciplinary letter to a licensee expressing concerns and requesting that a licensee take corrective action, including further medical education.

The Board voted to issue 16 confidential Letters of Warning or Education due to the following areas of concern:

1. Concerns that a physician may have accessed patient records for an inappropriate purpose.
2. Concerns that a physician engaged in a pattern of unprofessional conduct.
3. Concerns that a physician provided overly aggressive treatment to patients.
4. Concerns that a physician failed to communicate with a patient's family members.
5. Concerns that a physician failed to obtain an adequate patient history during a mental status examination.
6. Concerns that a physician failed to perform a repeat colonoscopy on a patient who had signs of cancer.
7. Concerns that a physician failed to perform a thorough patient work-up.
8. Concerns that a physician failed to perform a thorough examination.
9. Concerns that a physician failed to appropriately respond to the Board's investigation.
10. Concerns that a physician engaged in unprofessional conduct.
11. Concerns that a physician failed to provide appropriate care to a patient who had a history of drug abuse.
12. Concerns that a physician was sanctioned by another state for providing care without an appropriate state permit.
13. Concerns that a physician failed to provide appropriate care to a patient with chronic asthma.
14. Concerns that a physician surrendered his medical license in another state while under investigation.
15. Concerns that a physician failed to adequately explain a physical examination to the patient.
16. Concerns that a physician consumed alcohol despite an agreement not to.

Board Appearances: The Board may ask a licensee to appear before the Board to discuss concerns when the Board determines that a face-to-face meeting will assist the Board during the investigative process.

The Board held five appearances due to the following concerns:

1. Concerns that a physician engaged in unprofessional conduct.
2. Concerns that a physician engaged in deceptive and disruptive behavior.
3. Concerns that a physician performed a procedure when the patient was not adequately prepped for the procedure.
4. Concerns that a physician failed to obtain an adequate patient history during a mental status examination.
5. Concerns about a physician's utilization of endoscopy and endoscopic retrograde cholangiopancreatography (ERCP).

Monitoring Committee: The Monitoring Committee monitors licensees who have been disciplined by the Board and require monitoring.

The Monitoring Committee reviewed 14 cases.

Screening Committee: The Screening Committee reviews cases that are lower priority and have not been investigated by the Board to determine whether investigation is warranted.

The Screening Committee reviewed 38 cases.

Licensure Committee: The Licensure Committee is a committee reviews initial license applications, renewals and reinstatements other licensure policies and issues. Most license applications are approved by Board staff without Licensure Committee review. However, some applications raise concerns about an applicant and the Licensure Committee must review the matter to determine whether a license should be granted, renewed or reinstated.

The Licensure Committee reviewed seven licensure applications. Four permanent licenses were granted, two permanent licenses were granted by way of consent agreements, and one applicant was asked to withdraw their application.

The Licensure Committee approved 14 Letters of Warning that were issued due to concerns that the applicants failed to provide truthful, accurate or complete information on the license application.

The Licensure Committee reviewed a letter received from Wayne County Hospital about the licensure process on a recent applicant.

In other action the Board:

- Reviewed and approved the schedule of licensure and service fees for fiscal year 2013. The fees will remain unchanged. The schedule is available on the Board's website, www.medicalboard.iowa.gov
- Voted to oppose the Iowa Board of Nursing's proposal to eliminate language from Iowa Code Chapter 152 that requires recognition of appropriateness of education and training by the medical profession before a nurse practitioner's scope of practice is expanded in some areas.
- Acknowledged Governor Branstad's appointment of Analisa Haberman, D.O., a family physician from Mason City, to the pool of alternate members for contested case hearings.

- Appointed Douglas Peters, Iowa City, and Laura Van Cleve, D.O., Grinnell, to the Iowa Physician Health Committee, effective January 1, 2013.
- Received updates from the Iowa Attorney General's Office on the status of eight Board cases under review in state courts.
- Received a statistical report on Iowa Physician Health Program. On September 1, 2012, there were 76 participants in the program. There were 34 new participants in the program since January 1, 2012, and 38 had been discharged during the same period.

A press release describing public disciplinary action taken by the Board was distributed and posted on the Board's Website on September 26, 2012. If you have questions about this summary or Board's disciplinary action press release, please contact Kent Nebel, Legal Director, at (515) 281-7088 or kent.nebel@iowa.gov.